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CONFIRMATION NO. 9919

Bib Data Sheet

SERIAL NUMBER 10/692,654	FILING DATE 10/24/2003 RULE	CLASS 073	GROUP ART UNIT 2856	ATTORNEY DOCKET NO. D0419.70008US00
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APPLICANTS

H. Donald Schwartz, Marblehead, MA;

**** CONTINUING DATA ******* *YCP*

This application is a CIP of 10/443,350 05/22/2003 PAT 6,805,015

**** FOREIGN APPLICATIONS ******* *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

**** 05/03/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>PSY</i> Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY MA	SHEETS DRAWING 20	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 7
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ADDRESS

David Wolf
 Wolf, Greenfield & Sacks, P.C.
 600 Atlantic Avenue
 Boston, MA
 02210

TITLE

Pipetting module

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